

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Reform America Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00581934 </div> |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | | | |
|---|--------------------|---|--|--|--|
| Full Name of Payee Fedex | | | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">09 / 19 / 2016</div> </div> | | |
| Mailing Address 3875 Airways | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26.75</div> | | |
| City Memphis | State TN | Zip Code 38116-5070 | Transaction ID : E5F3AF8EB9F3545EF9AC Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">09 / 16 / 2016</div> </div> | | |
| Purpose of Expenditure Shipping | | Category/ Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div> | Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hillary Rodham Clinton | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1283486.77</div> | | | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____ | | |

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|---|--------------------|---|--|--|--|
| Full Name of Payee Nonbox | | | Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">09 / 19 / 2016</div> </div> | | |
| Mailing Address 5307 S 92nd St | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1283460.02</div> | | |
| City Hales Corners | State WI | Zip Code 53130-1677 | Transaction ID : EE6F8A675839D4A4C9F7 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">09 / 16 / 2016</div> </div> | | |
| Purpose of Expenditure Media Buy & Production | | Category/ Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div> | Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hillary Rodham Clinton | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1283486.77</div> | | | Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____ | | |

| | |
|--|------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ► | 1283486.77 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ► | |
| (c) TOTAL Independent Expenditures..... ► | 1283486.77 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lorri Pickens
[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

09 / 21 / 2016

Signature